

United States of America
Department of Transportation — Federal Aviation Administration
Supplemental Type Certificate

Number SA5830SW 190-878
CRW

This certificate, issued to Arkansas Modification Center, Inc.
P.O. Box 3356 - Adams Field
Little Rock, AR 72203

certifies that the change in the type design for the following product with the limitations and conditions therefor as specified hereon meets the airworthiness requirements of Part 25 of the Federal Aviation Regulations.

Original Product — Type Certificate Number: A21EA
Make: Canadair
Model: CL-600-1A11, CL-600-2A12, CL-600-2B16

Description of Type Design Change:

Installation of Radio Master Switch System in accordance with Arkansas Modification Center, Inc., Drawing List No. 600-062, Rev. C dated 7/15/88, or later FAA approved revision.

Limitations and Conditions:

FAA approved airplane flight manual supplement dated 7/22/88 is required for the CL-600-2B16. Compatibility of this modification with previously installed equipment must be determined by installer.

This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked, or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.

Date of application: November 7, 1984

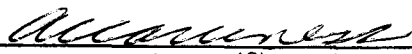
Date reissued:

Date of issuance: November 20, 1984

Date amended: 7/22/88 Rev. 1



By direction of the Administrator

For 
L. B. Andriesen (Signature)
Manager, Rotorcraft Directorate,
Aircraft Certification Service
(Title)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

This certificate may be transferred in accordance with FAR 21.47.

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of this Supplemental Type Certificate.

The FAA will reissue the certificate in the name of the transferee and forward it to him.

TRANSFER ENDORSEMENT

Transfer the ownership of Supplemental Type Certificate Number _____

to *(Name of transferee)* _____

(Address of transferee) _____

(Number and street)

(City, State, and ZIP code)

from *(Name of grantor)* *(Print or type)* _____

(Address of grantor) _____

(Number and street)

(City, State, and ZIP code)

Extent of Authority (if licensing agreement): _____

Date of Transfer: _____

Signature of grantor *(In ink)*: _____